



CASA of the Tennessee Heartland
Anderson Co.-100 N. Main St. Rm 115 Clinton, TN 37716 P: 865.463.6850
Blount Co.-391 Court St. Rm. 212 Maryville, TN 37802 P: 865.273.5993
Scott Co.-2845 Baker Highway Huntsville, TN 37756 P: 423.663.8943

Board Member Application

Board Member

PERSONAL INFORMATION

Full Name _____ (Maiden) _____

Prefer to be called _____ Birthdate _____

Sex _____ Social Security Number (used for background checks only) _____

Home Address _____

Home Phone _(____)_____

Times easily reached _____ Years in area _____

(Include area code for all phone numbers)

Fax No. _____ Cell phone _____

E-mail _____

Emergency Contact Info

Contact Name _____ Relationship _____

Contact Phone _(____)_____ Alternate Phone _(____)_____

Contact Address _____

CURRENT EMPLOYMENT

Current Employer _____ How Long _____

Position/Title (full or part time) _____

Work Phone _(____)_____ Supervisor/Contact _____

Responsibilities _____

May we contact you at work? ____ Yes ____ No

Does your current employer have an employee volunteer time/donation matching plan?

____ Yes ____ No If Yes, please provide the contact information for the department that

handles employee matching _____

EDUCATION

High School _____ Circle highest completed: 9 10 11 12

College _____ Circle highest completed: 9 10 11 12

Major _____ Degree _____

Graduate School _____ Degree _____



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BOARD INFORMATION

Do you have any training or experience in any of the following? (Please circle)

| | | | |
|-----------------|---------------------------------|-------------------|----------------|
| Medicine | Mental Health | Counseling | Fundraising |
| Psychology | Substance Abuse Programs | Child Development | Mediation |
| Child Care | Social Work | Computers | Graphic Design |
| Law Enforcement | Advertising or Public Relations | News Media | Writing |

* Not required to become a volunteer

Other Languages spoken _____

Hobbies/Special Interest _____

Professional/Civic/Social Affiliations _____

How did you become aware of CASA? _____

Why are you interested in joining our organization? _____

What do you feel are the strengths and weaknesses that you would bring to this program?

Have you served on other organization boards? If so, please list them and any office you held:



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Do you have a committee you'd like to serve on or a particular area of interest? _____

Have you had personal experience involving:

Child Abuse or Neglect? _____

Department of Human Services? _____

Department of Children's Services? _____

Juvenile Court System? _____

Foster Care? _____

Adoption? _____

Agencies offering services to a child? _____

Please list three personal references with mailing addresses, (include PO Box number and zip code). References cannot be related to applicant.

1. Name _____

Address _____ City, State, Zip _____

Daytime Phone _____ Relationship _____

E-Mail Address: _____

2. Name _____

Address _____ City, State, Zip _____

Daytime Phone _____ Relationship _____

E-Mail Address: _____

3. Name _____

Address _____ City, State, Zip _____

Daytime Phone _____ Relationship _____

E-Mail Address: _____



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As part of the background investigation, we may conduct a criminal records check, a motor vehicle division record check, education, employment history, credit history, and/ or child protective services check. Please complete the authorization for this and certification.

AUTHORITY TO OBTAIN INFORMATION

I authorize CASA of the Tennessee Heartland to obtain information concerning my suitability to become an employee of this agency from the Department of Children’s Services; the Child Abuse Register; the Department of Corrections; the District Attorney’s office; juvenile, civil and criminal court records; the Department of Motor Vehicles; police/sheriff records; education; employment history; credit history; and any other screening agency.

Signature

Date

Information obtained under the above release shall be held in confidence and shall be used exclusively to determine the suitability to serve as an employee.

Have you lived outside the East Tennessee region in the past five years? ___ No ___ Yes
If yes, please list your previous addresses for the past five years:

CERTIFICATION OF SUITABILITY

I, the undersigned, hereby certify that I have had no convictions resulting from a criminal offense (excluding traffic violations) nor is there any criminal action or investigation pending. I further certify that I have had no convictions on charges pertaining to child abuse or child neglect nor have I ever been investigated by any social services agency regarding allegations of child abuse or child neglect.

Signature

Date

If you are ineligible to certify to the above, please describe the circumstances below.



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For Board Use Only

____ Nominee was referred by _____

____ Nominee was mailed an application packet. Date: _____

____ Nominee had a personal meeting with executive director, board chair, or other board member. Date: _____

____ Nominee's application was reviewed by the nominating committee. Date: _____

____ Nominee was interviewed by the board. Date: _____

Action taken by the board _____ Date: _____